







# "They were all together... discussing the best options for me": Integrating specialist diabetes care within primary care

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#### Introduction:

In Australia, over a third of encounters with health care providers for patients with diabetes fail to provide clinical guideline appropriate care. The Diabetes Alliance, an integrated care model implemented across a large healthcare district, was aimed at enhancing diabetes care capacity at primary care level and has been associated with improvements in metabolic parameters<sup>1</sup>.

## **Results:**

Key themes surrounding the positive aspects of the program emerged from the data. These included:

- Patients experienced a boost in confidence in diabetes self-management (particularly around nutrition),
- The program provided patients with an opportunity to refocus when "life gets in the way"



The model of care implemented was

- Intensive case-conferencing with
  - the primary care team
  - patients
  - a visiting specialist team;
- Whole practice performance feedback
- Regular diabetes masterclasses.

We aimed to provide in-depth insight into the case-conferencing process that 84 practices, 343 Primary Care Physicians and 100 Practice Nurses participated in. We aimed to define the impact of this model of care had for patients with diabetes.

- Urbenville Tenterfield / Prince Albert Emmaville / Vegetable Creek Moree Warialda Tamworth 

  Walch Werris Creek Ouirindi
- The holistic approach to healthcare was viewed positively by patients
- Reduced travel time, familiarity in the environment and clinical care

Top-down knowledge transfer and mutual learning by the patient and their primary care team.

Patients also described aspects where the program could be improved as well as struggles with disease management. These included difficulties with:

- Coping with diabetes as a chronic illness
- Adhering to treatment recommendations

"The results are probably just as good it probably if I can say probably even better because the GP is also learning, the GP is hearing from a specialist."

"I think having, having, with the Alliance you've got the doctor, the dietician and the nurse and your own doctors there it, it makes it more comfortable."

## Methods:

Five practices participating in the Alliance model were selected based on proportion of patients with recent HbA1c

- 2 with high proportion
- 3 with low proportion

Patients selected from each practice based on Patient Activation Measure<sup>2</sup> scores to achieve maximum variation

- 1 or 2 patients with high scores
- 2 or 3 with low scores

Level 1	Level 2	Level 3	Level 4
Disengaged and	Becoming aware, but	Taking action	Maintaining behaviors
overwhelmed	still struggling		and pushing further
Individuals are passive	Individuals have some	Individuals have the key	Individuals have adopted
and lack confidence.	knowledge, but large	facts and are building	new behaviors, but may
Knowledge is low,	gaps remain. They	self-management skills.	struggle in times of
goal-orientation is	believe health is largely	They strive for best	stress or change.
weak, and adherence is	out of their control, but	practice behaviors, and	Maintaining a healthy
poor. Their perspective:	can set simple goals.	are goal-oriented. Their	lifestyle is a key focus.
"My doctor is in charge	Their perspective: "I	perspective: "I'm part of	Their perspective: "I'm
of my health."	could be doing more."	my health care team."	my own advocate."
Increasing Levels of Activation			

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"...gives you more of an insight into little things that you can improve."

"It sort of becomes a bit of a juggling act so... there's depression, pain management, diabetes."

### **Conclusion**:

"It made me feel that it was, um, it was going to be helpful, but the fact that ongoing care will be with those two people."

Providing timely integrated specialist care within the primary care setting is an efficient means of enhancing the engagement of diabetic patients with their diabetes care and therefore their outcomes.



#### 1. Parsons M, Luu J, Acharya S, Philcox A. Diabetes Alliance in the Hunter and New England region. International Journal



#### 2. Hibbard JH, Stockard J, Mahoney ER, Tusler M. Development of the patient activation measure (PAM): conceptualizing

and measuring activation in patients and consumers. Heath Serv Res. 2004; 39 (4 Pt 1): 1005-1026.